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State of Idaho

LOBBYIST A	NNUAL	REPORT	FORM
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To Be Filed By:

L-2 LOBBYISTS

Page		_of	f	Pa	ge(s
THIS	SPACE	FOR	OFFICE	USE	ONES

EFIN	31.5	Ben Ysursa Secretary of S		1.1-2	(Sec. 6	67-661	.9)		q	8 JAN 14	AM 8:	: 53
		(Type or print clear See instructions at	arly in black ink)	Annual	l		]Ser	- mi-Annu	ıal <sup>SE</sup>	CRETARY STATE OF	OF S IDAH	TATE i0
Lobbyis	t's name ar	nd permanent busine				Dat	e prepar	ed		Period	covered	
Blake	e G. Hall									(	year en	ding
	Box 516					1/2/07				(Mo.	) (Day)	(Yr.)
Idaho	o Falls, I	D 83405								12	31	07
Item 1	То	tals of all reportal	ole expenditures made	or incurred	by Lobby	yist or	by Lot	byist's Empl	oyer on b	ehalf of Lobb	yist's Emp	loyer.
C		Expenditure	***************************************					by each emp	oyer (Ide	ntify employer	s, under	
Expens	es Pertaining	al Living and Travel to Lobbying Activity	*Total Amount for All Employers		t bottom				1			
D	o Not Have	to be Reported		Emplo	oyer No. 1		Emp	loyer No. 2	Empl	oyer No. 3	Employ	er No. 4
	inment nd Refresl	ment	\$	\$			\$		\$		s	
	Accommo								-			
Advert				-				1		- down		
Travel	ising					_						
	000					-						
Telepho		Comrisons				_						
Other	expenses o	r Services				-						
		Total	s0.00	s	0.0	0 !	\$	0.00	\$	0.00	s	0.00
*When	the numbe	r of employers you	 u are reporting for requi	res multiple	L-2 form	ıs to be	filed a	total amount	for all en	nployers should	l 1 be entere	d on Page 1.
Item		ls of each expendi	iture of more than fifty	dollars (\$50								
	Date		Place		An	nount	N:	ames of Legis	lators, Put	olic and Execu	live Officia	ls in Group
	N/A											
							ĺ					
_												
'للم	Continued of	on attached page(s)				¥4						
		INST	RUCTIONS			Iten 3	<u>'</u>	En	nployer(s)	Name(s) and A	ddress(es)	
Wh	o should	file this form: A	ny lobbyist registered	under Section	on	No. 1	CH2	M WG IDA	NHO, LL	P,		
	6617 Idah					NO. 1	150	N. Ridge A	ve., #1	50, Idaho F	alls, ID 8	33401
Fili	ng deadl		rt is due on January 31: obbist semi-annual repo		31st.	No. 2						
то	BE FILE	D WITH-									,	
10	11111	В	sen Ysursa			No. 3						
			etary of State Box 83720									
	Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282					No. 4						

Item 4	personal property to any Legislator. Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.							lic or Executive Official.
	N/A	Date	Amount	Nar	ne of L	egislator, Public or Executive Offic	cial Rec	eriving or Benefiting
_(from	5 or House the Lobb		atter of proposed legislation, the number of the Saill, Resolution or other legislative activity in six was supporting or opposing.  Resolution or Other laptropriation Bill Ni and Section Number.		Code	LEGISLATIVE SUB  Subject Agriculture, horticulture, farming, and fivestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state		IDENTIFICATION  Subject  Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
Item 6	cor	ntract bid		lecision, procurement, ancial services agreement or opposing	L En	ERTIFICATION: I hereby certify the brief statement in accordance with Stat		
					 Er	mployer No. 4 signature		Date